

Best Available Copy

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
04-762-011

FILING DATE

APPLICANT(S)

CLAIMS

| AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|-----------------|------|------------------------|------|------------------------|------|
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| TOTAL IND. | 1 | | | | |
| TOTAL DEP. | 0 | | | | |
| TOTAL CLAIMS | | | | | |

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE
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